

STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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JUL 27 2017

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NEW HAMPSHIRE

I. Name of Lobbyist	(s) Joel	Maio	la	·			DEPARTMENT OF
II. Name of lobbyist	's partne	rship, 1	firm or c	corporation, if a	ny:		
McLane Middlet	on Gov	ernme	nt & F	ublic Strat	egies. L	LC	
				orporation)			
900 Elm Street	. P.O.	Box	326	Manchest	ter	NH	03105-0326
	treet)	20%		(Town/City)		(State)	(Zip Code)
(603) 608 1406			(602)	605 5650		71	:-1-01
(603) <u>628-1485</u> (Telephone)			(603) 625-5650 (Fax)		e-mail Joel.	maiola@mclanegps.com
, ,					•		
							may file a separate report for
reportable expense	ıransacıı	OOS WIII	ich äre n	ot attributable i	to any one c	neatj.	
X All reportable tra	nsactions	осситті	ng in the	months prior to	the reporting	date relative t	o the following client:
•			J	•		,	Ü
NH Hospital As			31'		11 1 1 1 1 1 1 1		
<u>OR</u>	(Full Na	ame of C	lient as i	t appears on the Lo	ibbyist Registr	ration Form)	
	icactione k	by the le	abbssiet (including the lob	hviet'e famil	v) or the lobb	ying firm listed below which are
unrelated to any parti			oooyist (merading the 100	oyist s failti	y), or the 1000	ying titili tisted below which are
IV. Date of Report	April :	26, 201	7 🛚		July	26, 2017 🔀	
				n to 3/31/17	•	m 4/1/17 to 6/30	V17
	Octob	er 25, 2	017 🗆			uary 31, 2018 (
	activity fr	rom 7/1/	17 to 9/30	9/17	activity fro	om 10/1/17 to 12	2/31/17
V. There have bee If this box is checked, Concord, NH 03301.							te the last report. George State House, Room 204,
VI. Check if addition	nal renor	te ara a	ttachad	•			
If you have received	-				ile Addendu	ı m. A Fees and	1 Expenses
•	an honora		•	· •			Report of Honorariums or
•		amily h	as made	political contribu	utions, vou m	nust file Adder	dum C-Political Contributions
,, ,,	, ,	,			, ,		
	RSA 15-B	, RSA	14-C and		ereby swear (or affirm that tl	he foregoing information is true
and complete to the b	est of my	knowle	age and	Deller.			
- Charl	_	ne			7	7/26/2017	
(Signature of lobbyis	t)					(Date)
Joel Maiola							
(Print Name of lobby	ist)						

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Joel Maiola	
II. Name of lobbyist's partnership, firm or corporation, if any:	
McLane Middleton Government & Public Strategies, LLC (Name of partnership, firm or corporation)	
III. Name of Client NH Hospital Association	Date 7/26/2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	t relations, or public relations services
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ 25,000.00 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this reported any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid apenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 25,000.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ _25,000.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$50,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from beginning by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
	P\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
af mil	7/26/2017
(Signature of lobbyist)	(Date)
Joel Maiola	
(Print Name of lobbyist)	